



STATE OF MICHIGAN

DEPARTMENT OF COMMUNITY HEALTH
LANSING

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**STATE INTERAGENCY NURSING HOME CLOSURE TEAM
NURSING HOME CLOSURE INFORMATION
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Purpose

This information has been developed to assist residents, families and other persons involved in the relocation of individuals when a nursing home voluntarily and permanently closes.

Notice Requirements

The Michigan Compiled Laws, MCL 333.21785, requires the nursing home to notify the Department of Community Health (DCH) and the Michigan Department of Human Services (DHS), formerly the Family Independence Agency, if it intends to voluntarily discontinue operations. The nursing home must also give at least a 30-day notice of discontinuance to the resident and the resident's support team, which may include the resident's next of kin, guardian, or other representative. Written notice is preferred. The purpose of the notice is to provide sufficient time for the resident or the resident's support team to make suitable arrangements for the relocation and care of the resident. The nursing home is responsible for care of the resident until the relocation is complete.

Arrangements for Relocation

The resident or the resident's family, working with the nursing home, has the primary responsibility for the relocation, and may relocate the resident at any time within the 30 day period, if a suitable placement is located. Suitable placement is considered a setting that can provide necessary care to meet specific care needs of the resident. A resident or the resident's support team may choose a setting for relocation, and the resident may be relocated as soon as arrangements for relocation are completed. Residents and their support team may seek alternative (non-nursing home) placement during this period, or after relocation. The Adult Services staff in the local DHS may offer options to the resident or resident's support team for relocation. DCH and the nursing home are responsible for finding a suitable relocation for the resident if there are no relatives or responsible parties.

It is very important that residents and their support teams attend all informational meetings provided by the nursing home or DHS to become aware of the steps to be taken in relocation, as well as to learn about available nursing home vacancies and community based services that can assist them in making choices. Family members may want to visit other settings before a relocation choice is made.

Residents and their support teams should ensure that the following specific relocation questions are resolved with the nursing home prior to transfer.

There may be other issues that need to be resolved prior to relocation depending on the particular resident.

1. Where is the resident being relocated? (Name, address, phone number)
2. Can the new setting meet the specific care needs of the resident?

3. Does the new setting have appropriate space for the resident and the resident's belongings?
4. What are the transportation arrangements for the resident? (Who, how and when.)
5. Has the current nursing home provided the resident or resident's support team with an accounting of funds?
6. Have all personal belongings been returned to the resident?
7. Are all the resident's belongings tagged for transfer, such as clothing, television set, furniture, etc?
8. Are the resident's clinical records available for transfer with the resident? Record requirements are attached.
9. Have transfer orders for resident's medications or new prescriptions been made available to the new setting?
10. Has a care plan been provided to the new setting?
11. Are the resident's assistive or adaptive devices, or wheelchair being transferred with the resident?

Support Agencies

1. The Adult Services staff of the local DHS provides primary relocation support and can assist residents and their support teams with the following services: resident assessments, determination of nursing homes with beds available to which residents can transfer, possible alternatives to nursing home placement, and ensuring that copies of medical records are forwarded to the receiving facility. After relocation, the DHS will also assess residents' needs and adjustment to the relocation.

Concerns with placement may be reported to the local DHS. To contact your local DHS office, check a local directory, or call (517) 373-9172.

2. The local Community Mental Health Service Provider (CMHSP) can be contacted for assistance in locating appropriate residential alternatives for persons with mental health needs who require placement in a setting other than a nursing home. Local CMHSP provides continuity of mental health services to residents who move from one nursing home to another in the same county and for residents who move to a nursing home in another county. To locate your area Community Mental Health provider, check your local directory, or call (517) 335-3090.
3. There are several local agencies that can help with community-based care. To locate these agencies, either check your local phone directory, go on line to www.1866michltc.net or call 517 373-4072.
 - Center for Independent Living can help with assessment and advocacy for people with disabilities.
 - Area Agencies on Aging (AAA) are a referral and assessment resource.
 - MI Choice Waiver Agencies provide assessment and support for people to remain in their homes who would otherwise be in a nursing facility or other setting.

4. The Department of Community Health, Bureau of Health Systems (BHS), regulates nursing homes. Its staff will receive first notice of the closure from the home's administration; review closure plans with the home; participate in resident/family meeting(s) regarding the closure; and monitor services in the home during the closure process to ensure quality care is provided until the last resident is relocated.

Residents, families and other persons who have questions regarding the closure process may contact the Bureau of Health Systems at one of the following numbers:

Detroit	(313) 456-0340
Gaylord	(989) 732-8062
Lansing	(517) 334-8408

Problems with care during a transfer may be reported to the BHS Complaint Hotline at 1-800-882-6006.

NURSING HOME CLINICAL RECORD REQUIREMENT

1. A clinical record shall be provided for each patient in the home. The clinical record shall be current and entries shall be dated and signed.
2. The clinical record shall include, at a minimum, all of the following:
 - A. The identification and summary sheet, which shall include all of the following patient information:
 - (1) Name.
 - (2) Social Security Number.
 - (3) Veteran status and number.
 - (4) Marital status.
 - (5) Age, sex, home address, and telephone number.
 - (6) Name, address, and telephone number of next of kin, legal guardian, or designated representative.
 - (7) Name, address, and telephone number of person or agency responsible for patient's maintenance and care in the home.
 - (8) Admission date.
 - (9) Clinical history and physical examination performed by the physician within 5 days before or on admission, including a report of chest x-rays performed within 90 days of admission and a physician's treatment plan.
 - (10) Admission diagnosis and amendments thereto during the course of the patient's stay in the home.
 - (11) Consent forms as required and appropriate.
 - (12) Physician's orders for medications, diet, rehabilitative procedures, and other treatment or procedures to be provided to the patient.
 - (13) Physician's progress/clinical notes written at the time of each visit describing the patient's condition and other pertinent clinical observations.
 - (14) Nurse's notes, progress notes and observations by other personnel providing care.
 - (15) Medication and treatment records.
 - (16) Laboratory and x-ray reports.
 - (17) Consultation reports.
 - (18) Time and date of discharge, final diagnosis and place to which patient was discharged, condition on discharge, and name of person, if any, accompanying patient.